

Application Data Sheet

**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: NEW POLYMERS AND APPLICATIONS  
Attorney Docket Number:: 1510-1102  
Request for Early No  
Publication?:  
Request for Non-Publication?: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 3  
Small Entity?: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?:

10/526965

DT01 Rec'd PCT/PTC 07 MAR 2005

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: JONS  
Middle Name::  
Family Name:: HILBORN  
Name Suffix::  
City of Residence:: SIGTUNA  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing S:T PERSGATAN 12  
Address::  
City of Mailing Address:: SIGTUNA  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: 193 30

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: TIM  
Middle Name::  
Family Name:: BOWDEN  
Name Suffix::  
City of Residence:: UPPSALA  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing ULLERAKERSVAGEN 62  
Address::  
City of Mailing Address:: UPPSALA

State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: 756 43

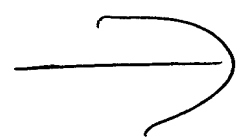
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEB  
Status:: Full Capacity  
Given Name:: FREDRIK  
Middle Name::  
Family Name:: NEDERBERG  
Name Suffix::  
City of Residence:: STOCKHOLM  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing Address:: S:T ERIKSGATAN 43  
Address:: 2TR  
City of Mailing Address:: STOCKHOLM  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: 11234

**Correspondence Information**

Correspondence Customer Number:: 00466

**Representative Information**

Representative Customer Number::	00466
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE2003/001395	9/5/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0202619-3	9/5/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::